Provide comments for:

H. Disaggregation of Emergency Calls to 911

- 259. Should CAs who handle Emergency Calls be required to take additional training, if so, what is the nature of the training? Include training already provided for the purpose of handling emergency calls.
- VIs should take specific training to be able to process Emergency 911 calls. There is a
 tentative curriculum already developed to address law enforcement, fire and medical
 situations, in addition to specific ethical situations that VIs have encountered. The curriculum
 outline will be made available to the FCC upon request, ensuring that intellectual property
 rights are protected.
- There is no training specific to call content, it has all been related to "connecting" to the local PSAP and obtaining the ALI.
- Benefits to be gained by routing VRS 911 calls to pre-identified CAs who, under contract, would be specifically trained to handle the safety and medical issues.
- Could support services, such as managing stress, be provided more efficiently and effectively to a limited pool of CAs than to all VRS CAs?
- Yes and No. It would be more helpful to provide specific support services to VIs who are
 processing 911 Emergency Calls, however, all VIs and VRS Providers must still have the
 capability to call 911 and process a call in the event that an emergency occurs while
 interpreting a non-emergency, regular VRS call, i.e. a caller passes out while on hold with Dell.
- To what extent should CAs who handle emergency calls be integrated into general purpose VRS centers or separated into centralized regional call centers? What about specialized centers who reach capacity, contingency plans.
- 911 VIs should be housed within local PSAPs along with 911 telecommunicators and should be funded by the FCC with payments to local government for running the VP interface. This should not be a "profit making" venture by any entity. There should not be separate specialized centers, further removing VIs from the process. In addition, the potential benefits for having VIs and Telecommunicators housed in the same locations will allow for cross training and best practices to be developed. In addition, the VIs could then be included in what the PSAPs already have in place for Traumatic calls. In addition, the local government that must have contingency plans for their 911 services would also have contingency for video calls. In the NG911 environment, this could be handled as part of the infrastructure.
- 260. EAAC recommendations to create nationally certified Media Communications Line Service centers – for processing NG911 calls for ALL persons with disabilities using voice, video, text and data.

- FCC seeks comment on how these centers would work
- Proposed Regulatory Changes national and uniform standards for relay service providers in processing 911 calls
- Recommended training standards and evaluation criteria for CAs
- Seeks input regarding the appropriateness of integrating any or all of the EAAC's proposal.
- The EAAC proposal did not include the RID or any sign language interpreter, therefore any
 proposal to impose standards on VIs should be rejected. Instead, the FCC should reach out
 the RID to provide recommended minimal standards and requirements for Vis processing 911
 emergency calls.
- The RID has the ability to create a Specialty Certification in 911 Emergency Call Processing.
- VRS Providers must also still educate and train VIs in emergency call processing as there may
 be incidents that the VI will need to dial 911. VRS users should not be required to hang up and
 dial 911, and some may not be able to do so.
- The establishment of segregated call centers should be rejected as the document and proposal
 is not well thought out, nor is it reasonable or cost effective to have segregated centers. In
 addition, the greed of providers will continue to hamper the ability of VIs to work in
 supportive environments instead of punitive ones if it is run by any for profit or non-profit
 agencies.

Respectfully submitted,